

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|--------|----------|
| FEE DETERMINATION | <i>Bm</i> | | 07-07-01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | <i>TI</i> | 1112 | 8/16/01 |
| RESPONSE FORMALITY REVIEW | | | |
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INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|---------|
| Final Original | |
| 1 | 8/11/03 |
| 2 | 8/17/04 |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

K. D. 11/21